

KY OFFICE OF HOUSING, BLDGS & CONSTRUCTION
ELEVATOR SECTION
101 SEA HERO RD SUITE 100
FRANKFORT, KY 40601-5405

CERTIFICATE NUMBER: _____

DATE: ____/____/____

APPROVED BY: _____

*Please use the latest certificate of operation to fill out as much of the following as possible.

OWNER _____

() _____

COUNTY: _____

MAKE: _____

DESC. KEY (Type of device): _____ CONTROL (hyd/traction?) _____

CAPACITY: _____ lbs. RATED SPEED: _____ fpm.

OPERATOR: _____

HORSEPOWER OF MOTOR: _____

CHECK NUMBER: _____

CHECK AMOUNT TOTAL: _____

FEE SCHEDULE FOR PERMIT INSPECTIONS

Note: This schedule applies to each inspection performed, until unit has met all code requirements and has been released for use with no violations on the alteration or modernization.

0-5 HORSEPOWER - \$75.00

6-10 HORSEPOWER - \$85.00

11 HORSEPOWER AND UP - \$85.00 (PLUS \$10.00 FOR EACH HORSEPOWER OVER 10 HORSEPOWER)

THIS ALTERATION PERMIT IS REQUESTED FOR: **PLEASE SELECT APPROPRIATE RESPONSE**

- ☐ COMPLIANCE WITH VIOLATION(S) CITED BY STATE INSPECTOR, NO OTHER WORK TO BE PERFORMED.
(ATTACH A Copy OF INSPECTION REPORT * NO FEE REQUIRED)
- ☐ ALTERATION / UPGRADE REQUESTED BY OWNER (ASME A17.3 EXISTING CODE FOR ELEVATORS AND ESCALATORS AS ME A17.1 "SAFETY CODE FOR ELEVATORS AND ESCALATORS" PARTS X, XII, & XIV MUST BE COMPLIED WITH AS REFERENCED WITHIN THE APPLICABLE CODES).
- ☐ APPLICATION IS HEREBY MADE TO THE DIVISION OF ELEVATOR INSPECTIONS FOR THE ALTERATION OF ONE UNIT AS INDICATED
BELOW:
WE PROPOSE TO.... _____

- ☐ APPLICATION IS HEREBY MADE TO THE DIVISION OF ELEVATOR INSPECTIONS FOR A PERMIT TO USE ONE ELEVATOR FOR CONSTRUCTION USE ONLY (transport construction personnel, materials, & tools) FOR A PERIOD NOT TO EXCEED NINETY (90) DAYS. IT IS UNDERSTOOD THAT THE ELEVATOR IS NOT TO BE USED FOR ANY OTHER PURPOSE(S) AND THAT COMPLIANCE WITH ASME A17.1 "SAFETY CODE FOR ELEVATORS AND ESCALATORS" PARTS X & XIX MUST BE MET AT A MINIMUM. THE ELEVATOR CANNOT BE USED FOR CONSTRUCTION USE UNTIL THE REQUIRED INSPECTION(S) AND TEST(S) HAVE BEEN COMPLETED, AND THE ELEVATOR INSPECTOR RELEASES THE UNIT FOR THIS USE.

SIGNED: _____

DATE: ____/____/____

Month Day Year

REPRESENTING: _____

ADDRESS: _____

PHONE: _____